○ CPER ○ PPER		State of Nevada	- Special Pay / T	ime Adjustment	t Sheet	
Agency (B/A) Home Org		Agency Name				**For Central Payroll Use Only** Approved (Initials)
Employee Last Name	Initials Internal ID	Appt ID Input Total	Event Date	Event Codes OT Code		Explanation
				1 1 1 1		
			, , , , , , ,			
			_			
			- - - -			
			- - - -			
					11111	
		 		 	 	
					1 1 1 1 1 1	
			 			
Prepared By		Date		Approved By		Date
Telephone Number				This is to be signed when paying leave balances for terminating employees to certify that all leave taken has been reported and the employee is entitled to payment of the balance(s).		
Entered (Initials)	Date	1 1		Signature		Date